

Attorney Docket No.: 03108/0201076-US0

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on March 28, 2005
Date

B.W. Lee

Signature

B.W.L.E.E

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1pg)

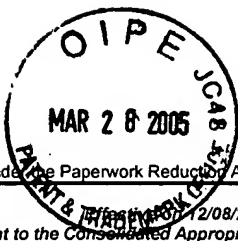
Amendment Transmittal (1 page)

Amendment (10pgs)

Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Check # **8085** in the amount of \$325.00

Return Receipt Postcard



Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 325.00

Complete if Known

Application Number	10/810,339-Conf. #8252
Filing Date	March 26, 2004
First Named Inventor	Raghunath V. Chaudhari
Examiner Name	S. A. Witherspoon
Art Unit	1621
Attorney Docket No.	03108/0201076-US0

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 28 - 24 = 4 Extra Claims Fee (\$): 25.00 Fee Paid (\$): 100.00

Multiple Dependent Claims Fee (\$): Fee Paid (\$):

Indep. Claims 1 - 3 = 3 Extra Claims Fee (\$): Fee Paid (\$):

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets /50 Number of each additional 50 or fraction thereof Fee (\$): Fee Paid (\$):

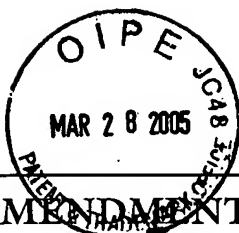
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2252 Extension for response within second month 225.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	54,479	Telephone	(212) 527-7700
Name (Print/Type)	Michael J. Sullivan	Date	March 28, 2005		

**AMENDMENT TRANSMITTAL LETTER**Docket No.
03108/0201076-US0Application No.
10/810,339-Conf. #8252Filing Date
March 26, 2004Examiner
S. A. WitherspoonArt Unit
1621

Applicant(s): Raghunath V. Chaudhari et al.

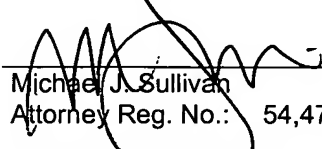
Invention: SELECTIVE LIQUID PHASE OXIDATION OF TOLUENE TO BENZALDEHYDE

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	28	- 24 =	4	x 25.00	100.00
Independent Claims	1	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within second month					225.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					325.00

☐ Large Entity☒ Small Entity☐ No additional fee is required for this amendment.☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 325.00 to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
Michael J. Sullivan
Attorney Reg. No.: 54,479DARBY & DARBY P.C.
P.O. Box 5257
New York, New York 10150-5257
(212) 527-7727Dated: March 28, 2005

Express Mail Label No.

Dated: _____